



**EAST STOW**  
**RURAL DISTRICT COUNCIL.**

.....

**ANNUAL REPORT**

OF THE

**Medical Officer of Health,**  
**1925.**


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**Special Survey Report (5 years)**

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STOWMARKET

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TO THE  
CHAIRMAN AND MEMBERS  
OF THE  
EAST STOW RURAL DISTRICT COUNCIL.

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STOWMARKET,

*April, 1926.*

GENTLEMEN,

I beg to present to you the Annual Report on the Health of East Stow for the year ending 31st December, 1925.

According to instructions from the Ministry of Health, this report is a Survey report.

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**NATURAL AND SOCIAL CONDITIONS OF THE AREA.**

Area (in acres) 21,126.

Population (Census 1921, 6330) ; estimated 1925, 6530.

**Physical Features and General Character of the Area.**

Inland—generally flat—watered by River Gipping, and a few small tributaries—soil of a mixed character, mostly fertile and well cultivated, with some small woods and a few small pits of chalk, gravel, flint, and brick earth.

No. of inhabited houses (1921) 1515.

Number of families or separate occupiers (1921) 1515.

Rateable value—£36,669.

Sum represented by a penny rate, £115 11s. 4d.

**Social Conditions and Occupations of the Inhabitants.**

The occupation of the inhabitants is mainly agricultural; except in the parishes immediately adjoining the town of Stowmarket, which contains a Silk Factory, a Collodion Factory, Chemical Manure Works, Saw Mills, Flour Mills, Brewers' Chemicals Factory, Maltings, Tannery, etc. There are few large estates, the district being mainly divided into small farms, few exceeding 300 acres.

## THE AMOUNT OF POOR RELIEF for the Year ended March 31st, 1925.

Cost of institutional relief for Stow Union, including Stow-market Urban, East Stow and Thedwastre Rural Districts, £8,580.

Cost of Outdoor Relief for Union, £4,330.

Number of Institutional Paupers chargeable to Union on January 1st, 1926, 123.

Number of Paupers in receipt of Outdoor (including Medical) Relief, 367.

Cost of Pauper Lunatics for year ended March 31st, 1925, £4,698.

Number of Lunatics on January 1st, 1926, 87.

### VITAL STATISTICS.

		TOTAL.	M.	F.	
Births	{ Legitimate	93	59	34	} Birth Rate 15·16 per 1000.
	{ Illegitimate	6	1	5	

Deaths	73	37	36	Death Rate 11·17 per 1000.
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Number of women dying in, or in consequence of,

childbirth	{ from sepsis	...	Nil
	{ „ other causes		Nil

Deaths of Infants under one year:—Total 2 (Illegitimate Nil)

Deaths of Infants under one year of age per 1000 births:—

Legitimate 21·50. Illegitimate 0. Total 20·20.

For England and Wales in 1925:—

The Birth Rate was 18·3 per 1000.

The Death Rate was 12·2 per 1000.

The Infant Mortality Rate was 75 per 1000 births.

Deaths from Measles (all ages) Nil

„ Whooping Cough (all age) Nil

„ Diarrhœa (under 2 years of age) Nil

Unusual or excessive mortality during the year which has received or required comment:—There were 5 deaths from Tuberculosis (all Pulmonary), 6 deaths from Cancer, 13 deaths



from Heart Disease, 11 deaths from Cerebral Hæmorrhage, and 5 from Pneumonia.

An epidemic of influenza started towards the end of February, increased during March, and subsided early in April, generally mild in type, although there were a few cases complicated with Pneumonia, with 1 death.

## GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

*Hospitals provided or subsidised by the Local Authority  
or County Council.*

(1) Hospital for Tuberculosis is provided by the County Council (Normaston).

(2 & 3) There is no special Maternity or Children's Hospital.

(4) There is an **Isolation Hospital** with 22 beds which serves three districts:—the Stowmarket Urban, East Stow Rural and Thedwastre Rural Districts. This Hospital is now owned jointly by the three districts concerned and is managed by a Joint Hospital Committee.

A new Isolation Block with two main wards and two observation wards (12 beds in all) was built in 1924, and commenced to be occupied at the beginning of 1925.

During the year 70 cases of Scarlet Fever were admitted into this block, and it is difficult to conceive what we should have done without this building.

Altogether 70 cases of Scarlet Fever and 24 cases of Diphtheria were admitted during the year with no deaths from Scarlet Fever, but 3 deaths from Diphtheria. These latter were admitted in an almost hopeless condition.

Cases admitted:—

		Scarlet Fever.	Diphtheria.
From Stowmarket Urban District	...	31	—
„ East Stow Rural District	...	30	12
„ Thedwastre Rural District	...	9	12
		70	24

There is a need to replace the old part of the Hospital which now serves as an Administration block and a Diphtheria block by two new up-to-date blocks, whenever the expense can be borne, but this is out of the question at present.

(5) Smallpox is provided for by special arrangement with Ipswich.

(6) Ordinary Hospital cases are well served by the East Suffolk and Ipswich General Hospital at Ipswich.

There is no Cottage Hospital in the district.

#### *Ambulance Facilities.*

(a) For infectious cases:—Horse ambulance. It is most important that we should have a Motor Ambulance for the infectious cases, it would prevent a lot of suffering to patients on long journeys, and prevent a great waste of time for nurses and driver.

(b) For non-infectious and accident cases:—Motor ambulances from Ipswich.

#### *Clinics and Treatment Centres.*

The Child Welfare Centre which started in January, 1919, and was most successful for the first four years, has quite recently been given up by order of the County Council I understand, on account of poor attendance and lack of interest, although I have received no notification of the fact from the County Authorities. A Health Visitor is still employed in visiting the infants in their homes.

The Clinic for Venereal Diseases is held at the East Suffolk Hospital, Ipswich.

#### *Public Health Officers of the Local Authority.*

One part-time Medical Officer of Health and one whole-time Sanitary Inspector and Highway Surveyor.

#### *Professional Nursing in the Home.*

(a) General. There is one District Nurse at Haughley, and one has just been secured for the combined parishes of Finborough, Buxhall and Onehouse.

(b) For Infectious Diseases, e.g., Measles, etc. If extra help is required for such, a Health Visitor can be obtained temporarily from Ipswich provided by the County Council.

#### *Midwives.*

There are no Midwives employed or practising in the district, except those on the Staff at Stow Union Workhouse in the parish of Onehouse, but some work is done in the district by two Stow-market midwives.

## CHEMICAL WORK.

Water analyses are generally performed by the Local Medical Officer of Health.

Pathological and Bacteriological examinations are provided by the County Council at Ipswich; this service is fully used by the Medical Practitioners in the district and regularly by the Isolation Hospital.

Diphtheria antitoxin is provided by the Local Authority.

## LEGISLATION IN FORCE.

Local Acts :—Nil

Special Local Orders :—Nil.

General Adoptive Acts and Byelaws relating to Public Health in force in the area :—Regulations relating to Dairies and Cowsheds.

## SANITARY CIRCUMSTANCES OF THE AREA.

### Water.

COMBS.—At Combs there is a supply for a portion of the parish from Waterworks belonging to the District Council. There is a deep well bored 250ft. into the chalk. The water is pumped up by means of 2 oil engines and is carried by a piped service directly to 120 houses.

There are also 2 ponds provided by the District Council.

CREETING ST. PETER.—At Creeting St. Peter there is a deep well bored 220 ft. into the chalk. The water is pumped up by means of 1 oil engine to tanks which serve for the deposit of iron contained in the water as well as for storage. From a stand pipe it is carried by hand, there being no piped service. This supplies about 53 houses.

HAUGHLEY.—At Haughley there is a public well bored to a depth of 184 ft. It is furnished with a hand-pump, but there is no piped service.

OLD NEWTON.—Old Newton is provided with supplies from 4 ponds provided by the District Council, and from 1 deep well bored 278 ft. into the chalk, and 1 well 30ft. deep.

WETHERDEN.—There is 1 pond provided by the District Council.

STOWUPLAND.—At Stowupland there is a supply from Waterworks belonging to the District Council, there is a deep well bored 300ft. into the chalk. The water is pumped up by means of 2 oil engines and is carried by a piped service directly to 105 houses and to the Council Schools.

There are also 3 ponds provided by the District Council.



The lower or urban portion of Stowupland is supplied from the Stowmarket Urban Council Waterworks and is carried by a piped service to about 185 houses.

The remainder of the district is supplied by private wells and private ponds.

### **Rivers and Streams.**

The river Gipping and other small streams are liable to pollution. They are often largely choked with silt and vegetation, but the Gipping has recently been cleaned out for a portion of its course. Quite recently complaints have been received from the Farmer's Union of serious pollution of the Gipping by the effluent from the New Silk Works; the matter has been investigated by the County Medical Officer.

The street drains at Haughley discharge into an open ditch, and the effluent eventually finds its way into the Gipping

### **Drainage and Sewerage.**

The urban portion of Stowupland which adjoins Stowmarket and that part of Combs known as Combs Ford are sewered to 2 collecting tanks from which the sewage is pumped by means of gas engines in the case of Stowupland, and electricity in the case of Combs Ford, to sewage disposal works situated in the rural district and owned jointly by the Stowmarket Urban and the East Stow districts.

No. of houses connected to the Sewage:—

Combs	88
Stowupland	197

One of the sewers at Stowupland has lately been extended a distance of 260ft.

### **Closet Accommodation.**

The closet accommodation in the rest of the district is pail closets and privy middens.

No of pail closets 619, the remainder privy middens.

Privy middens are rapidly being abolished and pail closets substituted. Pamphlets have been issued as to the proper care of pail closets.

The sanitary conditions in most parishes are not scientific, but the scattered and open character of the district generally prevents any serious nuisances and makes any general scheme of sewerage or sewage disposal impossible.



## Scavenging.

In the urban portion of Stowupland house refuse is removed weekly under contract with the District Council. Elsewhere it is disposed of by occupiers.

The sanitary condition of Haughley calls for special comment, and has done so for many years. This is a fair-sized compact village and therefore differs in character from most of the district. Slop-water is often improperly emptied into and runs down an open drain in the street; many houses have very small gardens or backyards, rendering the disposal of sewage, refuse, etc. very difficult. The idea of a water carriage sewerage scheme is probably too ambitious, but I consider that a system of disposal by a night-soil cart would improve matters considerably. However, the whole matter is at present under consideration by the District Council, and the County Medical Officer is being called in for investigation and advice.

## Sanitary Inspection of the Area:—

(a) The number and nature of inspections made by the Sanitary Inspector during the year, 207.

Accumulation of manure and refuse, 5  
Ditches, 9  
Complaints, 7  
Nuisances from foul closets, 3  
Defective drains, 1  
Defective privies, 11  
Dirty premises, 1  
Overcrowding, 6  
Number of privies converted to pail closets, 11  
Other nuisances, 14

(b) Number of Notices served during the year—

Statutory Notices, 68  
Informal Notices, Nil

(c) The result of the service of such Notices—All have been complied with, save a few still being dealt with.

## Disinfection.

This is carried out after recovery from infectious diseases, also after death from consumption and cancer when notified.

## HOUSING.

### 1.—General Housing Conditions in the area.

(1) The housing accommodation is on the whole fair in quality, but inadequate in quantity. Many of the older cottages, however, are in an advanced state of decay, and are very limited in sleeping accommodation.

- (2) —(a) Extent of shortage or excess of houses. There is a considerable shortage, but, owing to changing industrial conditions, it is not possible at the present time to make an exact estimate of the same.  
(b) Measures taken or contemplated to meet any shortage; the District Council have, since 1913 erected 72 houses for the working classes, are now building an additional 30 and are undertaking contracts for about 16 more.
- (3) Information as to any important changes in population during the period under review or anticipated in the future. No important changes have taken place and none are anticipated in the near future, but the Silk Factory may bring more workers into the district.

## 2.—Overcrowding.

- (1) Extent: Many cases.
- (2) Causes: shortage of houses with three bedrooms for the larger families, and inability to pay a high rent.
- (3) Measures taken or contemplated for dealing with overcrowding. Notices have been served to abate overcrowding in some cases, but the problem cannot adequately be dealt with until more houses are provided with three bedrooms at a rent within the capacity of the tenants.
- (4) Principal cases of overcrowding during the year 1925, and action taken.

Some orders have been served for abatement, and in some cases families have found other houses or removed some of their members, but most Notices remain inoperative under present conditions.

## 3.—Fitness of Houses.

- (1) (a) General standard of housing in the area: fair, but many of the older cottages are poor and without sufficient bedrooms.  
(b) General character of defects found in unfit houses: dampness of walls and floors, insufficient ventilation and reparation, defective doors and windows, and faulty drainage.  
(c) How far defects are due to the lack of proper management and supervision by owners, or to acts of waste or neglect by the tenants. Perhaps equally.
- (2) General Action taken as regards unfit houses under—

### (a) The Public Health Acts:

Notices have been served to abate nuisances, but no legal proceedings for enforcement have been necessary during the year.

*(b)* The Housing Acts :

Notices have been served to remedy defects, and in most cases have already been complied with.

## (3) Difficulties found in remedying unfit houses :

Many cottages belong to poor persons unable to meet the high cost of repairs, and necessary alterations in many cases cannot be executed without displacement of tenants, who cannot find other accommodation. Some owners also who wish, but are unable to oust some of their tenants refuse, till compelled, to execute necessary repairs.

**HOUSING STATISTICS FOR THE YEAR, 1925.**

Number of new houses erected during the year:—

*(a)* Total (including numbers given separately under *(b)*), 18.

*(b)* With State assistance under the Housing Acts :

(1) By the Local Authority : Nil.

(2) By other bodies or persons : 15.

## 1.—Unfit dwelling houses.

Inspection—(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts), 102.

(2) Number of dwelling houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 or the Consolidated Regulations, 1925, 27.

(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation, Nil.

(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation, 4.

## 2.—Remedy of defects without service of formal notices.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers, 2.

## 3.—Action under Statutory Powers.

A—Proceedings under Section 28 of the Housing, Town Planning Act, 1919.

(1) Number of dwelling houses in respect of which notices were served requiring repairs, Nil.



- (2) Number of dwelling houses which were rendered fit :
  - (a) By owners, Nil.
  - (b) By Local Authority in default of owners, Nil.
- (3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close, Nil.

#### B—Proceedings under Public Health Acts.

- (1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied, 17.
- (2) Number of dwelling houses in which defects were remedied :
  - (a) By owners, 16.
  - (b) By Local Authority in default of owners, Nil.

#### C—Proceedings under Sections 17 and 18 of the Housing, Town Planning Act, 1909,

- (1) Number of representations made with a view to the making of Closing Orders, Nil.
- (2) Number of dwelling houses in respect of which Closing Orders were made, Nil.
- (3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit, Nil.
- (4) Number of dwelling houses in respect of which Demolition Orders were made, Nil.
- (5) Number of dwelling houses demolished in pursuance of Demolition Orders, Nil.

### INSPECTION AND SUPERVISION OF FOOD.

#### (a) Milk Supply.

The district is supplied by local producers who also export a considerably quantity. The County Police take samples for examination. The supply as a whole is abundant and wholesome. No action in respect of Tuberculous milk has been necessary.

## **Dairies—Cowsheds.**

Inspections have been made of all premises registered, and Notices served for remedy of defects.

### **(b) Meat.**

There are only two Butchers in the district, together with a few vendors of pork. No inspector of meat has been appointed, but the shops and slaughter-houses are inspected and have been found in good condition. There is no public abattoir in the district.

Slaughter-houses 6 (satisfactory).

### **(c) Other Foods.**

Bakehouses have been inspected and found satisfactory. No other action has been found necessary.

Bakehouses 3 (in good condition).

## **PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.**

In surveying the prevalence of infectious diseases since 1920, the two noticeable points are the decrease of Diphtheria and the increase of Scarlet Fever (see Table at end of Report).

In 1925 there were 12 cases of Diphtheria notified, but 3 of these proved to be negative, and the others occurred (all but one) in the one parish of Haughley, the first case being imported from another district, spreading by contact in school at first, and in homes later to 7 others. Most of these were of a very virulent type, especially the latter ones, and occurred in the insanitary part of Haughley already referred to. When we really get a virulent type of Diphtheria, we generally appear to have two conditions:—The presence of a “carrier” and some insanitary condition such as privy-middens, dead-wells, overcrowding, etc.

The increase of Scarlet Fever appears to be due mainly to the very mild nature of the cases, causing delay in recognition in some cases until peeling has commenced. Many of the cases of Scarlet Fever occurred in parts of the district adjoining the Urban district of Stowmarket. Many of the real rural parishes escaped altogether.

Every case of Diphtheria and Scarlet Fever was admitted into the Isolation Hospital,

Disease.					Total Cases Notified.	Cases admitted to Hospital.	Total Deaths.
Small-pox	...	...	...	...	Nil	—	—
Scarlet Fever	...	...	...	...	31	31	Nil
Diphtheria	...	...	...	...	12	12	3
Enteric Fever	...	...	...	...	Nil	—	—
Puerperal Fever	...	...	...	...	2	Nil	Nil
Septicæmia	...	...	...	...	1	Nil	Nil
Pneumonia	...	...	...	...	10	Nil	5
Erysipelas	...	...	...	...	3	—	Nil

### TUBERCULOSIS.

New Cases and Mortality during 1925.

Age-Periods.			New Cases.				Deaths.			
			Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
			M.	F.	M.	F.	M.	F.	M.	F.
0	...	...								
1	...	...			1					
5	...	...				1				
10	...	...				2				
15	...	...			1					
20	...	...		2	1					
25	...	...		1	1					
35	...	...	2	1						
45	...	...								
55	...	...	1							
65 and upwards			1		1					
Totals	...		4	4	5	3	4	1		

### MATERNITY AND CHILD WELFARE.

An Infant Welfare Centre was opened in January 1919, and was carried on for six years, apparently doing a considerable amount of good. This has quite recently been given up by order of the County Council.

There is no Clinic for expectant mothers.

There is no special maternity home or hospital; if for any reason a case cannot be treated at home, it can under certain circumstances be taken into the Local Infirmary, or into the East Suffolk Hospital.



There have been 8 cases of Puerperal Fever notified during the last five years.

Very little epidemic Diarrhœa.

Ophthalmia Neonatorum in 1925, 2.

### OPHTHALMIA NEONATORUM.

Notified	CASES ———Treated———		Vision unimpaired	Vision impaired	Total Blindness	Deaths
	at home	in hospital				
2	2	Nil	2	Nil	Nil	Nil

### Summary and General Survey.

The birth-rate in 1925 was very low, but so was the Infant Mortality rate, both being the lowest on record for this district I believe.

Tuberculosis, however, shows no sign of decrease, and points the need for tackling the housing problem seriously. I would suggest that the most urgent need of the district is the provision of additional housing accommodation, especially of houses with 3 sleeping rooms.

Deaths from Cancer average between 8 and 9 a year for the last five years; notwithstanding all the talk about "Cures for Cancer," at present the only hope is early removal by the Surgeon, and consequently early diagnosis, therefore the public should be urged to seek advice as early as possible.

The importance of isolating influenza is not sufficiently appreciated, people not free from infection constantly travel in trains and other public vehicles, visit one another in their houses, and do not attempt isolation or ventilation in their homes. Most of our epidemics are traced to infection by people coming home at holiday times.

In conclusion, I should like to thank the Chairman and Members of the Council for the consideration they have always shown me, and the Sanitary Inspector for his continued assistance.

I have the honour to be, Gentlemen,

Your obedient servant,

**S. C. HOUNSFIELD,**

*Medical Officer of Health,*

**TABLE OF INFECTIOUS DISEASES FOR LAST 11 YEARS.**

Year	Diphtheria.	Scarlet Fever.	Pneu- monia.	Enteric Fever.	Puerperal Fever.	Tuber- culosis.
1915	6	20	—	—	—	10
1916	33	2	—	—	2	7
1917	12	3	—	—	—	8
1918	12	5	—	—	2	16
1919	8	3	—	—	1	10
1920	5	12	1	—	1	11
1921	11	40	1	1	3	16
1922	1	35	8	—	1	6
1923	1	5	3	—	2	14
1924	1	14	1	2	—	14
1925	12	31	10	—	2	16

**TABLE OF VITAL STATISTICS FOR LAST 11 YEARS.**

Year	Birth-Rate.		Death-Rate		Infant Mortality Rate per 1000 Births.	
	East Stow	England and Wales	East Stow	England and Wales	East Stow	England and Wales
1915	20·4		13·7		92·00	
1916	19·7		12·3		67·00	
1917	18·08		14·36		91·59	
1918	19·54		16·29		79·80	
1919	18·99		17·27		127·11	
1920	26·28	25·4	8·87	12·4	36·81	80·0
1921	21·35		9·16		37·0	
1922	17·91	20·6	11·36	12·9	78·26	77·0
1923	21·48	19·7	9·7	11·6	28·78	69·0
1924	20·55	18·8	11·87	12·2	51·85	75·0
1925	15·16	18·3	11·17	12·2	20·20	75·0